

740 N. Sedgwick, Ste. 500 Chicago, IL 60654-8488

Nature of

Services

Name

CITY OF CHICAGO 2018 STATEMENT OF FINANCIAL INTERESTS

To avoid a violation of the Government of Strict Indianate and sanctions, including fines and having for interest violation being the address you must return this form, completed and signed, no

lose of business Thursday, May 31, 2018 to: (312) 744-9660 Board of Ethics 740 N. Sedgwick, Ste. 500 Chicago, IL 60654-8488 - Please complete this form, sign it and then mail / deliver it to the Board of Ethics . We cannot accept Statements via eু দুৰ্বা, বিকলে formats. Please answer all 16 questions and sign and date your form before returning it. If you need more room, please attach and label extre figures. Terms with an asterisk(") are defined on the instruction sheet. + In questions 2-5 & 8, indicate the appropriate income, compensation or capital gain by writing in the appropriate catego: A= \$25,000 or more B= \$5,000 - \$24.9 NOTE: for security reasons, filers in the Chicago Fire ctor General's Office, Civilian Office of Police Accountability and Office of Emergency Communications and building and health inspectors need not disclose the address of business(ex), organizations or stion 9, however, they must list the number and types of properties owned, for examp property in questions 2 or 9; for qu Last Name: kWAZA First Name: kWELI Middle Initial: Mailing Address: City State: Zip: City Department/Board Title CONTRACT/city COUNCIL or Commission: 1. In 2017, were you employed by any governmental unit other than the City of Chicago? Yes × No If YES, list the name of each governmental unit 2. In 2017, did you serve as an employee, officer, director, associate, partner, or proprietor or in any advisory capacity for any professional, business or other organization (other than your City employment or appointment) from which you received or derived income of more than \$1,000.00? П Yes ⋉ No If YES, for each organization provide the following information: (see note above) Name & Type of Your + Amount of Income Position Address: Organization: By Category 3. In 2017, did you receive compensation in excess of \$5,000.00 for professional*, business or other services rendered to a person* or entity doing business* with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Pier and Exposition Authority? ⋉ No If YES, provide the following for each person or entity to which you provided services: Nature of Government Unit With Which - Amount of Income Name Person or Entity Did Business By Category Service 4. In 2017, did your spouse or domestic partner* receive compensation or payment in excess of \$5,000.00 for professional*, business, employment, work or other services rendered to a person* or entity doing business* with the City of Chicago, the Chicago Transit Authority, Chicago Board of × Yes ☐ No If YES, provide the following for each person or entity to which Spouse/ Domestic Partner provided services: Anita Lewis Kwaza Nature of Chicago Chicago Board Government Unit With Which + Amount of Income. Name 26,000 Public Schools of Educatio Person or Entity Did Business Services By Category 5. In 2017, did any entity in which you OR your spouse or domestic partner* have a financial interest* receive compensation in excess of \$5,000.00 for professional*, business or other services rendered to any person* or entity doing business* with the City of Chicago, the Chicago Transit Authority, Chicago Board of Education, Chicago Park District, Chicago City Colleges, or Metropolitan Pier and Exposition Authority? Yes X No If YES, provide the following information about the entity in which you/spouse/domestic partner have a financial interest: Name of Person or Entity to which Name Services were provided

6. In 2017, did you have a financial interest* in any person* doing business* with the City? (Note: common stock interests in publicly held companies that represent less than 1/2 of 1% (.05%) of the company's outstanding common stock, or time or demand deposits in financial institutions, or endowments, policies or annuities purchased from insurance companies, need not be disclosed.)

Government Unit With

Which Person Did Business

Amount of Income,

By Category

Title or Description of Position
You Held in This Person

ompanie	es that represent le	nancial interest* in any persor ss than 1/2 of 1% (.05%) of th s, policies or annuities purcha	e compan	y's outstandin	g common sto	ck, or time or d	emand depo	sits in		
If YES	5, provide the follo	wing for each person:								
Name					Type / In Ownersh	strument of lip				
		capital gain of \$5,000.00 or m						e of] Yes	⊠ No
If YES, ic	dentify the asset(s)) sold (including the address of d asset (see note at top of for	or legal de					of the	_	
							+ Amou		in , By	
orms of d	lirect or indirect ov	financial interest* in real estat wnership, such as partnership	s or trusts	whose corpus	consists prima	rily of real esta	te. (If your pi	rincipa	l place o	of
If YES		it or mixed-use building in w	35.0							⊠ No no address,
		from any person* (other than f \$250.00?					aving an		Yes	⊠ No
If YES	s, identify the pers	on or persons from whom you	u received	such gifts:						
1 - 201	7 did	any improper gift* that you d		61	ish Csi	2 156 144 -644				
overnme	ental Ethics Ordina	oper gift(s), the donor(s) if kn							Yes	⊠ No
r franchis If YES, li	se, or any permit for ist the name of the	a financial interest* in any per or annexation, zoning or rezo e person(s) in which you have action requested):	ning of re	al estate?				. [Yes	⊠ No e of the
Name						Action Requested				
r the Cit ans of th ans are r	y of Chicago in 20 ne kind you receive made at the preva	anyone owes you more than 17? (Do not include: (1) debt ed in accordance with other t illing rate of interest; or (2) de e to the public.)	instrume erms and bt instrun	nts issued by f conditions sta nents issued by	nancial institu ndard for such publicly held	tions whose no loans at the tim	ormal busines ne the debt w nd purchased	ss inclu as cor d by yo	udes the atracted	making of , if the
If YES	5, provide the follo	wing information:								
	of Debtor, or or Guarantor			Is the Person Creditor or G			Type of D Instrumer			
•	9 ANDONE CHO DAG	oard or commission either as a ve		6000 PP 121000	on (include non-	City boards or co	mmissions)?		Yes	⊠ No
		a relative* or domestic partne st(s) and the lobbyist's relatio			lobbyist with	the City's Board	of Ethics?		Yes	⊠ No
Nam		step and the lobbyist stellar	nomp to y			Relationshi	р			
		relative* or domestic partner							Yes	⊠ No
contrac	tor(s):) or domestic partner(s), his/h	ier/thêir r	elationship to	you, the City co	ontractor(s), and	u nis/ner/the	er posi	ition Wi	in the
Nam relati	e(s)/ ionship(s)		Contract	or(s)		Pe	osition(s)			
and b	elief it is true and co in fines, removal fro	that I have examined this Statem mplete. Junderstand that knowing office, or employment sanction	ngly filing	a Statement com	taining false or I	nisleading inforn	nation, or failin	g to file	by the	deadline, can

Signature and Date